

Appendix B – APPLICATION

U.S. Department of Agriculture Career Intern Program

Career Field _____

Name (last, first, middle) _____

Social Security No. _____ Temporary Mailing Address _____

City _____ State _____ Zip Code _____

Permanent Mailing Address _____

City _____ State _____ Zip Code _____

Temporary Phone _____ Permanent Phone _____

E-mail _____ U.S. Citizen: Yes No

Veteran's Preference: Five Point Ten Point Thirty Percent Compensable
(Attached DD214, Application for 10-Point Veteran's Preference (SF 15), or Department of Defense of Affairs documentation as appropriate.)

Birth Date _____ Birthplace _____
(Month, day, year) (City and state or county)

School _____ Grade Point Average _____

Date of Graduation _____ Major/Graduate Program _____

Availability: Washington DC Anywhere North South East West

Community Service _____

Awards _____

Leadership Examples _____

I certify that to the best of my knowledge and belief, all of the information I have provided in this application is made in good faith. I consent to the release of information from schools, employers, and other individuals and organizations about my ability and fitness for Federal employment.

SIGNATURE _____ **DATE** _____

Please Attach Your Resume to the Application

I am only interested in the following geographic locations. (Please check the locations where you wish to work.)

- | | |
|---|---|
| <input type="checkbox"/> Alabama | <input type="checkbox"/> Nevada |
| <input type="checkbox"/> Alaska | <input type="checkbox"/> New Hampshire |
| <input type="checkbox"/> Arizona | <input type="checkbox"/> New Jersey |
| <input type="checkbox"/> California | <input type="checkbox"/> New Mexico |
| <input type="checkbox"/> Colorado | <input type="checkbox"/> New York |
| <input type="checkbox"/> Connecticut | <input type="checkbox"/> North Carolina |
| <input type="checkbox"/> Delaware | <input type="checkbox"/> Ohio |
| <input type="checkbox"/> District of Columbia | <input type="checkbox"/> Oklahoma |
| <input type="checkbox"/> Florida | <input type="checkbox"/> Oregon |
| <input type="checkbox"/> Georgia | <input type="checkbox"/> Pennsylvania |
| <input type="checkbox"/> Hawaii | <input type="checkbox"/> Rhode Island |
| <input type="checkbox"/> Idaho | <input type="checkbox"/> South Carolina |
| <input type="checkbox"/> Illinois | <input type="checkbox"/> South Dakota |
| <input type="checkbox"/> Indiana | <input type="checkbox"/> Tennessee |
| <input type="checkbox"/> Iowa | <input type="checkbox"/> Texas |
| <input type="checkbox"/> Kansas | <input type="checkbox"/> Utah |
| <input type="checkbox"/> Kentucky | <input type="checkbox"/> Vermont |
| <input type="checkbox"/> Louisiana | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Maine | <input type="checkbox"/> West Virginia |
| <input type="checkbox"/> Maryland | <input type="checkbox"/> Wisconsin |
| <input type="checkbox"/> Massachusetts | <input type="checkbox"/> Wyoming |
| <input type="checkbox"/> Michigan | |
| <input type="checkbox"/> Minnesota | |
| <input type="checkbox"/> Mississippi | |
| <input type="checkbox"/> Missouri | |
| <input type="checkbox"/> Montana | |
| <input type="checkbox"/> Nebraska | |